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Substitute for form 1449A/PTO		Complete if Known				
		Application Number				
INFORMAT	ION DISCLOSURE	Filing Date				
	IT BY APPLICANT	First Named Inventor Jones				
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Sheet	of	Attorney Docket Number				

			U. S. PATENT D	OCUMENTS	
Examiner Initials*	Cite No.1	Document Number Number-Kind Code ^{2 (If known)}	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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